

FILED

DEC 22 2014

Missouri Public
Service Commission

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Laclede Gas Company
Legal Department
720 Olive Street
St. Louis, MO 63101

2. Article Number
(Transfer from serv)

7012 2920 0002 0666 8205

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

GC-2015-0147 12/15/14

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Denise Sauer*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Denise Sauer

C. Date of Delivery

12/17/14

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

17 DEC 2014 PM 1 T

• Sender: Please print your name, address, and ZIP+4 in this box •

MO Public Service Commission
Data Center
P.O. Box 360
Jefferson City, Mo 65102-0360

